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Dear Members of the Appropriations Committee, Connecticut General Assembly: geralist enders grant as all a lateres es rais plantes and a control of the control of the control of the contr

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We would like to offer testimony regarding The Governor's Budget Recommendations, particularly as relevant to Human Services. This testimony is informed by nearly 15 years of combined professional association with supportive housing and child welfare programs in Connecticut. We are faculty at the University of Connecticut. Preston Britner lives in Hampton and is an Associate Professor and the Associate Department Head of the Department of Human Development & Family Studies. Anne Farrell lives in Ridgefield and is an Assistant Professor in Human Development & Family Studies.

> The proposed budget would reduce by nearly 30% the amount of funding to the Supportive Housing for Families program and provide no new state Rental Assistance Program (RAP) vouchers. Before we discuss the likely consequences of these reductions, we'd like to share with you some of the research we've conducted on the Supportive Housing for Families program.

> The Connection, Inc.'s Supportive Housing for Families (SHF) initiative began as a program for women in recovery and their children. Today, the program aims to prevent the placement of children in foster care and hasten family reunification by providing housing and related supports. SHF includes intensive case management to address economic, social, educational, and health needs, along with access to scattered-site permanent housing. The program serves families who are engaged in recovery and related services, and who are working with the Department of Children and Families (DCF) to avoid foster care placement or reunify. SHF works to help each client create a safe, stable, and nurturing family environment and attain self-sufficiency.

> We interface with other researchers and practitioners and have examined the professional literature on child welfare and housing. Housing instability, homelessness, and limited supports increase child risk, threaten family unity, and impede reunification. 1,2,3 Connecticut is among the most expensive housing jurisdictions in the nation⁴, and the economic crisis is apt to produce more housing instability. Yet, housing and child protection are intertwined systems that can play a significant role in preventing costly out-of-home placements and facilitating prompt family reunification, resulting in cost savings.² SHF represents exactly the kind of collaboration that is needed to support vulnerable families; the SHF model will be highlighted at an upcoming national child welfare conference as an innovative cross-system partnership.

Beginning in 2001, staff from the University of Connecticut's Center for Applied Research in Human Development evaluated The Supportive Housing for Families program. We examined client and staff experiences and analyzed client characteristics, program components, and outcomes. SHF serves a population of families headed mostly by single women in their early thirties with two children. The majority of clients received some high school education. Clients

Courtney, M. E., McMurtry, S. L., & Zinn, A. (2004). Housing problems experienced by recipients of child welfare services. Child Welfare, 83, 393-422.

Child Welfare League of America (CWLA). (2005). National data analysis system. Washington, DC: Child Welfare League of America.

Dorre, Y.A., & Mihaly, L.K. (1996). Home sweet home. Washington, DC: CWLA Press.

National Low Income Housing Coalition. (2008). Out of reach 2007-2008. Washington, DC: National Low Income Housing Coalition.

are Caucasian/White (about 40%), African American (25%), or Hispanic/Latino (about 35%).

Most lost housing due to family break-up or eviction.

Our independent inquiries indicate that clients feel respected and engaged in case planning. Clients place great value on SHF case managers, job training programs, and housing subsidies. A number of positive outcomes were documented. The majority of closed cases left for permanent housing, and approximately 80% moved into improved housing situations. Of clients with substance abuse, nearly 85% were drug free at exit. Access to health care improved in approximately 75%. From intake to discharge, a larger proportion of clients were employed. More clients were employed at discharge (vs. intake). Families at SHF demonstrate significant, positive changes in the environment of care for children. Children whose families participate in SHF have shorter stays in foster care. In short, our findings to date indicate improvements in housing status and employment, abstinence from substances, and enhanced environments of care for children. Evidence suggests that the SHF model is also cost effective in comparison to "business as usual," in which families often receive fragmented services from several community and governmental agencies.

Completing the SHF program is associated with positive outcomes, particularly when one considers the likely alternatives, which have financial and human costs: more homeless families, higher utilization of shelters and transitional housing, more children in foster care, increased lengths of stay, and interruptions in education, employment, and health and mental health care.

We are encouraged by DCF's collaboration with SHF and its support of efforts to study the program. SHF is to be commended for detailed case records, commitment to quality, ongoing attention to program evaluation, and for their impressive efforts in recruiting, retaining and supporting Connecticut's high-risk families.

We understand that, if the proposed funding cuts are implemented, and RAP vouchers are unavailable, SHF's ability to support vulnerable families will be reduced by two-thirds. Cuts of this extent will likely jeopardize the well being and permanency of children; they may ultimately be quite costly, as families turn to less efficient and long-term forms of state-dependent care and lose their self sufficiency.

In conclusion, we urge you to restore support to The Connection, Inc.'s Supportive Housing Program and to fund Rental Assistance Program vouchers. This program sets the standard for "best practice" and, we argue, it is good policy.

Preston A. Britner, Ph.D.

Editor, The Journal of Primary Prevention Co-Chair, Families w. Service Needs Advisory Board

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